

CENTRAL OHIO BCA



2010 OHIO STATE BCA TEAM CHAMPIONSHIP TOURNAMENT

Open Team Standard Entry fee Late Fee Postmark By If Postmark 3/19/10 3/20/10-4/2/10 \$170 \$190 <input type="checkbox"/>	Women's Team Standard Entry fee Late Fee Postmark By If Postmark 3/19/10 3/20/10-4/2/10 \$140 \$160 <input type="checkbox"/>
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League Name _____ League # _____ League Operator _____ Address _____ City _____ St./Pr _____ Zip _____ Country _____ Daytime Phone _____	Make Check or money order payable and mail entry to: Central Ohio BCA 4201 S Hamilton Rd Columbus Ohio 43125
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Team Name _____

1. Captain _____ Phone Number _____ Address _____ City _____ St./Pr _____ Zip _____ Team Played On During League Season _____ Player ID # _____ circle one Summer Fall Winter Spring	5. Player _____ Phone Number _____ Address _____ City _____ St./Pr _____ Zip _____ Team Played On During League Season _____ Player ID # _____ circle one Summer Fall Winter Spring
2. Player _____ Phone Number _____ Address _____ City _____ St./Pr _____ Zip _____ Team Played On During League Season _____ Player ID # _____ circle one Summer Fall Winter Spring	6. Player _____ Phone Number _____ Address _____ City _____ St./Pr _____ Zip _____ Team Played On During League Season _____ Player ID # _____ circle one Summer Fall Winter Spring
3. Player _____ Phone Number _____ Address _____ City _____ St./Pr _____ Zip _____ Team Played On During League Season _____ Player ID # _____ circle one Summer Fall Winter Spring	7. Player _____ Phone Number _____ Address _____ City _____ St./Pr _____ Zip _____ Team Played On During League Season _____ Player ID # _____ circle one Summer Fall Winter Spring
4. Player _____ Phone Number _____ Address _____ City _____ St./Pr _____ Zip _____ Team Played On During League Season _____ Player ID # _____ circle one Summer Fall Winter Spring	8. Player _____ Phone Number _____ Address _____ City _____ St./Pr _____ Zip _____ Team Played On During League Season _____ Player ID # _____ circle one Summer Fall Winter Spring

All refund requests must be submitted in writing and be received in the Central Ohio BCA office no later than March 30 2009 all refunds will be charged a \$10.00 handling fee I am a current member of the BCA pool league and not a professional player by definition of the BCA pool league. I have read and agree to abide by the rules and regulations implemented by the State tournament committee. Central Ohio BCA reserves the right to determine players eligibility and playing division, or refuse entry to anyone. State tournament director may refuse entry if fields are full. Size of field is subject to change at the sole discretion of the state tournament committee. Being a weekend competition it is understood that matches could begin late into the evening and early the following day.

Team Captain Signature	Date	League operator signature
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